



## UNITED STATES PATENT AND TRADEMARK OFFICE

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Bib Data Sheet

CONFIRMATION NO. 3632

|   |   |                               |   |   |
|---|---|-------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>09/851,461  | <b>FILING DATE</b><br>05/08/2001<br><b>RULE</b>   | <b>CLASS</b><br>370           | <b>GROUP ART UNIT</b><br>2661   | <b>ATTORNEY DOCKET NO.</b><br>Poly-17/APP |
| <b>APPLICANTS</b><br>Hung-Hsiang Jonathan Chao, Holmdel, NJ;<br>Eiji Oki, Tokyo, JAPAN;   |   |                               |   |   |
| <b>** CONTINUING DATA *****</b><br>THIS APPLN CLAIMS BENEFIT OF 60/252,006 11/20/2000 <i>YES RLM</i><br>AND CLAIMS BENEFIT OF 60/253,335 11/27/2000 |   |                               |   |   |
| <b>** FOREIGN APPLICATIONS *****</b> <i>NONE RLM</i>  |   |                               |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **</b><br><b>** 06/28/2001</b>  |   |                               |   |   |
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged  | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Examiner's Signature _____ Initials _____ | <b>STATE OR COUNTRY</b><br>NJ | <b>SHEETS DRAWING</b><br>17   | <b>TOTAL CLAIMS</b><br>34                 |
| <b>INDEPENDENT CLAIMS</b><br>5  |   |                               |   |   |
| <b>ADDRESS</b><br>26479   |   |                               |   |   |
| <b>TITLE</b><br>Scheduling the dispatch of cells in multistage switches   |   |                               |   |   |
| <b>FILING FEE RECEIVED</b><br>561   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following:   |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |